| | $\overline{}$ |
|---------------------------------------------|---------------|
| Please type a plus sign (+) inside this box | 1 1 1 |

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| Application Number | ТВА |
|------------------------|------------------|
| Filing Date | January 26, 2001 |
| First Named Inventor | Agrawal |
| Group Art Unit | ТВА |
| Examiner Name | TBA |
| Attorney Docket Number | 47508.701 |

| l hereby appoi | int: | | | | | | į | - | | | |
|---------------------------------------------------------------|--------------------------------------------|-------------|------------|---------------|---------------|-------------|-------------|----------------------|-------------------------|---------------|------------|
| ✓ Practition | ners at Ci | ustomer N | lumber | 23483 | | | > | Pla Nul | 23 4 Tiber B. | 83 ar Code | |
| OR | | | | | | | ا | hat | | PIRK OFFICE | |
| Practition | er(s) nar | ned below | | | | | De -: | .41 = - F1 | ا مما | | 1 |
| | | Nam | пе | | | + | Registra | ation Ni | umber | | Į į |
| | | | | | | + | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| as my/our attorr | nev(s) or | agent(e) | to prosect | ute the an | plication | identifi | ed ahove | and to | i trans: | act all | ļ |
| business in the | | | - | | • | | | | 4113 | МП | |
| | | | | | | | | | | | |
| <u>Ple</u> ase change t | he corres | spondenc | e address | for the at | ove-ider | ntified a | application | ı to: | | | i |
| ✓ The above- | | | | | | | | | | | |
| OR | | | | | | | | | | | |
| Firm <i>or</i> Individual Na | | | | | | | | | | | |
| Address | | | | | | | | | | | |
| Address | | | | | | | | | | | |
| City | | | | | | State | <u></u> | | Zip | | |
| Country | | | | | | | | | | | |
| Telephone | | | | | | Fax | | | | | |
| I am the: | 4/ا د موا/4. | | | | | | | | | | |
| Applican | ıvınvento | и. | | | | | | | | | |
| 1 1 | | | | rest. See 3 | | | (0.6) | | | | |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | | | | | | | |
| | T. | | ATURE of | Applicant | or Assig | nee of | Record | | | | |
| Name | Name Sudhir Agrawa | | | | | | | | | | |
| Signature | Cudlen Akoamil | | | | | | | | | | |
| Date | $\rightarrow \alpha$. $/$ 10 $/$ \sim 1 | | | | | | | | | | |
| NOTE: Signatures of all forms if more than one | | | | ord of the en | itire interes | t or their | representat | ive(s) ar | e requir | ed. Submi | t multiple |
| *Total of 1 | | ms are subm | | | | | | | | | |
| | | | | | | | | | | | |

| 1 |
|--------|
| 1.00 |
| 12.0 |
| |
| |
| |
| Holl |
| ŝi |
| in. |
| ij |
| EU, |
| Ç. |
| 4 mag. |

| Piease type a | plus sign (+) inside | this box -> | +_ |
|---------------|----------------------|-------------|----|

DECLARATION FOR UTILITY OR

supplemental priority data sheet PTO/SB/02B attached hereto.

47508.701

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

Attorney Docket Number

| DESIG | First Named In | First Named Inventor Agrawal | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------------------------------------------------|--------------------|---------------|--|
| PATENT APPL | C | COMPLETE IF KNOWN | | | | |
| (37 CFR 1.63) | | Application Nur | | / | | |
| , – | , , , , , | Filing Date | January | uary 26, 2001 | | |
| ☑ Declaration Submitted OR | J Declaration Submitted after Initi | al Group Art Unit | TBA | | | |
| with Initial Filing | Filing (surcharge (37 CFR 1.16 (e)) required) | Examiner Name | e TBA | | | |
| A selection and the selection like | | | | | | |
| As a below named inventor, I he | • | | | | | |
| My residence, mailing address, ar | nd citizenship are as stat | ted below next to my nar | ne. | | | |
| I believe I am the original, first and names are listed below) of the sub | | | | | | |
| Modulation of Oligonucleot | | | | | , | |
| Nucleosides | • | | • | | | |
| # if if if - 1 i | (7 | itle of the Invention) | | | | |
| the specification of which is attached hereto | | | | | | |
| OR | | as United S | tates Application i | Number or PCT l | nternational | |
| was filed on (MM/DD/YYYY) | | | | | | |
| Application Number and was amended on (MM/DD/YYYY) (if applicable). | | | | | | |
| | I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. | | | | | |
| I acknowledge the duty to disclos in-part applications, material infor PCT international filing date of the | I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. | | | | | |
| | | <u> </u> | ny foreign applica | tion(s) for patent | or inventor's | |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. | | | | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Cop | | |
| | | | | | | |
| | | | | | H | |
| | | | | | 8 | |
| Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | | | | |
| I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. | | | | | | |
| Application Number(s) | | e (MM/DD/YYYY) | Addition | ol provinienal | liantian | |
| 60/178,562 | 01/26/2000 |) | Additional provisional application numbers are listed on a | | | |

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Piease type a plus sign (+) inside this box

+ Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

| Hiterial correspondence in 1911 | ustomer Num Bar Code La | abel | | | OR 0 | Correspondence address below |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-------------|--------------|-------------|---------------------|------------------------------------|
| Name PATENT TRADEMARK OFFICE | | | | | | |
| Address | | | | | | |
| Address | | | | | | |
| City | | | | State | | ZIP |
| Country | т | elephone | 9 | | | Fax |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | |
| NAME OF SOLE OR FIRST INV | ENTOR: | | | A petit | ion has been fil | ed for this unsigned inventor |
| Given Name Sudhir Family Name Agrawal or Surname | | | | | | |
| | | | | | | |
| Residence: City Shrewsbury | | | State MA | | Country USA | Date JAN · 19.2001 Citizenship USA |
| Mailing Address Hybridon, Inc. | | | | | | |
| Mailing Address 345 Vassar Stree | t | | | | | |
| City Cambridge State MA | | | ZIP 02139 | | Country | |
| NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor | | | | | | |
| Given Name (first and middle [if any]) Family Name or Surname | | | | | | |
| Inventor's Signature Date | | | | | | |
| Residence: City | | | State | | Country | Citizenship |
| Mailing Address | | | | | | |
| Mailing Address | | | | | | |
| City | State | | | ZIP | | Country |
| Additional inventors are being named | | suppleme | ntal Additio | | ntor(s) sheet(s) PT | |